

* required for saving **required for completion	
Facility ID:	Event #:
*Patient ID:	Social Security #:
Secondary ID:	
Patient Name, Last:	First: Middle:
*Gender: F M Other	*Date of Birth:
Ethnicity (specify):	Race (specify):
*Event Type: UTI	*Date of Event:
Post-procedure UTI: Yes No	Date of Procedure:
NHSN Procedure Code:	ICD-9-CM Procedure Code:
*MDRO Infection Surveillance:	
<input type="checkbox"/> Yes, this infection's pathogen & location are in-plan for Infection Surveillance in the MDRO/CDI Module <input type="checkbox"/> No, this infection's pathogen & location are not in-plan for Infection Surveillance in the MDRO/CDI Module	
*Date Admitted to Facility:	*Location:

Risk Factors

*Urinary Catheter status at time of specimen collection:

In place Removed within 48 hours prior Not in place nor within 48 hours prior

Location of Device Insertion: _____ Date of Device Insertion: ___/___/_____

Event Details

*Specific Event: Symptomatic UTI (SUTI) Asymptomatic Bacteremic UTI (ABUTI) Other UTI (OUTI)

*Specify Criteria Used: (check all that apply)

<u>Signs & Symptoms</u>		<u>Laboratory & Diagnostic Testing</u>
<p><u>Any Patient</u></p> <input type="checkbox"/> Fever <input type="checkbox"/> Urgency <input type="checkbox"/> Frequency <input type="checkbox"/> Dysuria <input type="checkbox"/> Suprapubic tenderness <input type="checkbox"/> Costovertebral angle pain or tenderness <input type="checkbox"/> Abscess <input type="checkbox"/> Pain or tenderness <input type="checkbox"/> Purulent drainage or material <input type="checkbox"/> Other evidence of infection found on direct exam, during surgery, or by diagnostic tests‡	<p><u>≤1 year old</u></p> <input type="checkbox"/> Fever <input type="checkbox"/> Hypothermia <input type="checkbox"/> Apnea <input type="checkbox"/> Bradycardia <input type="checkbox"/> Dysuria <input type="checkbox"/> Lethargy <input type="checkbox"/> Vomiting	<input type="checkbox"/> 1 positive culture with ≥10 ⁵ CFU/ml with no more than 2 species of microorganisms <input type="checkbox"/> Positive dipstick for leukocyte esterase or nitrite <input type="checkbox"/> Pyuria <input type="checkbox"/> Microorganisms seen on Gram stain of unspun urine <input type="checkbox"/> 1 positive culture with ≥10 ³ CFU/ml and < 10 ⁵ CFU/ml with no more than 2 species of microorganisms <input type="checkbox"/> Positive culture <input type="checkbox"/> Positive blood culture <input type="checkbox"/> Radiographic evidence of infection

‡per specific site criteria

*Secondary Bloodstream Infection: Yes No

** Died: Yes No UTI Contributed to Death: Yes No

Discharge Date: *Pathogens Identified: Yes No *If Yes, specify on pages 2-4.

Assurance of Confidentiality: The voluntarily provided information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 304, 306 and 308(d) of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).

Public reporting burden of this collection of information is estimated to average 32 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC, Reports Clearance Officer, 1600 Clifton Rd., MS D-74, Atlanta, GA 30333, ATTN: PRA (0920-0666).

CDC 57.114 (Front) Rev 4, v6.4

Pathogen #	Gram-positive Organisms									
_____	<i>Staphylococcus</i> coagulase-negative (specify): _____	VANC S I R N								
_____	<i>Enterococcus</i> <i>spp.</i> (specify) _____	AMP S I R N	CIPRO/LEVO/MOXI S I R N	DAPTO S N S N	DOXY/MINO S I R N	GENTHL⁵ S R N	LNZ S I R N			
		STREPHL⁵ S R N	TETRA S I R N	TIG S N S N	VANC S I R N					
_____	<i>Enterococcus</i> <i>faecium</i>	AMP S I R N	CIPRO/LEVO/MOXI S I R N	DAPTO S N S N	DOXY/MINO S I R N	GENTHL⁵ S R N	LNZ S I R N	QUIDAL S I R N		
		STREPHL⁵ S R N	TETRA S I R N	TIG S N S N	VANC S I R N					
_____	<i>Staphylococcus</i> <i>aureus</i>	CHLOR S I R N	CIPRO/LEVO/MOXI S I R N	CLIND S I R N	DAPTO S N S N	DOXY/MINO S I R N	ERYTH S I R N	GENT S I R N		
		LNZ S R N	OX/CEFOX/METH S I R N	QUIDAL S I R N	RIF S I R N	TETRA S I R N	TIG S N S N	TMZ S I R N	VANC S I R N	
Pathogen #	Gram-negative Organisms									
_____	<i>Acinetobacter</i> <i>spp.</i> (specify) _____	AMK S I R N	AMPSUL S I R N	AZT S I R N	CEFEP S I R N	CEFTAZ S I R N	CIPRO/LEVO S I R N	COL/PB S I R N	GENT S I R N	
		IMI S I R N	MERO/DORI S I R N	PIP/PIPTAZ S I R N	TETRA/DOXY/MINO S I R N	TMZ S I R N	TOBRA S I R N			
_____	<i>Escherichia</i> <i>coli</i>	AMK S I R N	AMP S I R N	AMPSUL/AMXCLV S I R N	AZT S I R N	CEFAZ S I R N	CEFEP S I R N	CEFOT/CEFTRX S I R N		
		CEFTAZ S I R N	CEFUR S I R N	CEFOX/CETET S I R N	CHLOR S I R N	CIPRO/LEVO/MOXI S I R N	COL/PB S I R N	ERTA S I R N		
		GENT S I R N	IMI S I R N	MERO/DORI S I R N	PIPTAZ S I R N	TETRA/DOXY/MINO S I R N	TIG S I R N	TMZ S I R N	TOBRA S I R N	
_____	<i>Enterobacter</i> <i>spp.</i> (specify) _____	AMK S I R N	AMP S I R N	AMPSUL/AMXCLV S I R N	AZT S I R N	CEFAZ S I R N	CEFEP S I R N	CEFOT/CEFTRX S I R N		
		CEFTAZ S I R N	CEFUR S I R N	CEFOX/CETET S I R N	CHLOR S I R N	CIPRO/LEVO/MOXI S I R N	COL/PB S I R N	ERTA S I R N		
		GENT S I R N	IMI S I R N	MERO/DORI S I R N	PIPTAZ S I R N	TETRA/DOXY/MINO S I R N	TIG S I R N	TMZ S I R N	TOBRA S I R N	
_____	<i>Klebsiella</i> <i>spp.</i> (specify) _____	AMK S I R N	AMP S I R N	AMPSUL/AMXCLV S I R N	AZT S I R N	CEFAZ S I R N	CEFEP S I R N	CEFOT/CEFTRX S I R N		
		CEFTAZ S I R N	CEFUR S I R N	CEFOX/CETET S I R N	CHLOR S I R N	CIPRO/LEVO/MOXI S I R N	COL/PB S I R N	ERTA S I R N		
		GENT S I R N	IMI S I R N	MERO/DORI S I R N	PIPTAZ S I R N	TETRA/DOXY/MINO S I R N	TIG S I R N	TMZ S I R N	TOBRA S I R N	

Pathogen #	Gram-negative Organisms (continued)									
_____	<i>Serratia marcescens</i>	AMK S I R N	AMP S I R N	AMPSUL/AMXCLV S I R N	AZT S I R N	CEFAZ S I R N	CEFEP S I R N	CEFOT/CEFTRX S I R N		
		CEFTAZ S I R N	CEFUR S I R N	CEFOX/CETET S I R N	CHLOR S I R N	CIPRO/LEVO/MOXI S I R N	COL/PB S I R N	ERTA S I R N		
		GENT S I R N	IMI S I R N	MERO/DORI S I R N	PIPTAZ S I R N	TETRA/DOXY/MINO S I R N	TIG S I R N	TMZ S I R N	TOBRA S I R N	
_____	<i>Pseudomonas aeruginosa</i>	AMK S I R N	AZT S I R N	CEFEP S I R N	CEFTAZ S I R N	CIPRO/LEVO S I R N	COL/PB S I R N	GENT S I R N		
		IMI S I R N	MERO/DORI S I R N	PIP/PIPTAZ S I R N	TOBRA S I R N					
_____	<i>Stenotrophomonas maltophilia</i>	LEVO S I R N	TETRA/MINO S I R N	TICLAV S I R N	TMZ S I R N					
Pathogen #	Fungal Organisms									
_____	<i>Candida spp.</i> (specify) _____	ANID S N S N	CASPO S N S N	FLUCO S S-DD R N	FLUCY S I R N	ITRA S S-DD R N	MICA S N S N	VORI S S-DD R N		
Pathogen #	Other Organisms									
_____	Organism 1 (specify) _____	Drug 1 S I R N	Drug 2 S I R N	Drug 3 S I R N	Drug 4 S I R N	Drug 5 S I R N	Drug 6 S I R N	Drug 7 S I R N	Drug 8 S I R N	Drug 9 S I R N
_____	Organism 2 (specify) _____	Drug 1 S I R N	Drug 2 S I R N	Drug 3 S I R N	Drug 4 S I R N	Drug 5 S I R N	Drug 6 S I R N	Drug 7 S I R N	Drug 8 S I R N	Drug 9 S I R N
_____	Organism 3 (specify) _____	Drug 1 S I R N	Drug 2 S I R N	Drug 3 S I R N	Drug 4 S I R N	Drug 5 S I R N	Drug 6 S I R N	Drug 7 S I R N	Drug 8 S I R N	Drug 9 S I R N

Result Codes

S = Susceptible I = Intermediate R = Resistant NS = Non-susceptible S-DD = Susceptible-dose dependent N = Not tested
§ GENTHL and STREPHL results: S=Susceptible/Synergistic and R=Resistant/Not Synergistic

Drug Codes:

- | | | | | |
|--------------------------------------|------------------------|---------------------------------------|------------------------------------|--|
| AMK = amikacin | CEFTRX = ceftriaxone | ERYTH = erythromycin | MICA = micafungin | STREPHL = streptomycin – high level test |
| AMP = ampicillin | CEFUR= cefuroxime | FLUCO = fluconazole | MINO = minocycline | |
| AMPSUL = ampicillin/sulbactam | CETET= cefotetan | FLUCY = flucytosine | MOXI = moxifloxacin | TETRA = tetracycline |
| AMXCLV = amoxicillin/clavulanic acid | CHLOR= chloramphenicol | GENT = gentamicin | OX = oxacillin | TICLAV = ticarcillin/clavulanic acid |
| ANID = anidulafungin | CIPRO = ciprofloxacin | GENTHL = gentamicin – high level test | PB = polymyxin B | TIG = tigecycline |
| AZT = aztreonam | CLIND = clindamycin | IMI = imipenem | PIP = piperacillin | TMZ = trimethoprim/sulfamethoxazole |
| CASPO = caspofungin | COL = colistin | ITRA = itraconazole | PIPTAZ = piperacillin/tazobactam | TOBRA = tobramycin |
| CEFAZ= ceftazidime | DAPTO = daptomycin | LEVO = levofloxacin | QUIDAL = quinupristin/dalfopristin | VANC = vancomycin |
| CEFEP = cefepime | DORI = doripenem | LNZ = linezolid | RIF = rifampin | VORI = voriconazole |
| CEFOT = cefotaxime | DOXY = doxycycline | MERO = meropenem | | |
| CEFOX= ceftaxime | ERTA = ertapenem | METH = methicillin | | |

Custom Fields

Label	_____ / ____ / ____
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Comments

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